

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Title:: Electronic Bill Presentment System With Client
Specific Formatting Of Data
Attorney Docket Number:: BT-001
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 11
Small Entity:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Keith
Middle Name:: David
Family Name:: Ludwig
City of Residence:: Newfields
State or Province of Residence:: NH
Country of Residence:: US
Street of Mailing Address:: 112 Piscassic Road
City of Mailing Address:: Newfields
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 03856

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

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Status:: Full Capacity
Given Name:: David
Middle Name:: Armand
Family Name:: Bennett
City of Residence:: Portsmouth
State or Province of Residence:: NH
Country of Residence:: US
Street of Mailing Address:: 77 Porpoise Way
City of Mailing Address:: Portsmouth
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 03801

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Gregory
Middle Name:: Ernest
Family Name:: Park
City of Residence:: Stratham
State or Province of Residence:: NH
Country of Residence:: US
Street of Mailing Address:: 55 Alderwood Drive
City of Mailing Address:: Stratham
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 03885

Correspondence Information

Correspondence Customer Number:: 29956
Name:: Timothy P. O'Hagan
Street of Mailing Address:: PO Box 1054
City of Mailing Address:: Portsmouth

State or Province of Mailing Address:: NH
Postal or Zip Code of Mailing Address:: 03802
Telephone:: (603) 343-1162
E-Mail Address:: Mail@timohagan.com

Representative Information

Representative::	Registration Number::	Name::
Primary	39,319	Timothy P. O'Hagan

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation in Part of	09/825,231	04/03/01

Assignee Information

Assignee Name:: Bottomline Technologies (DE) Inc.
Street of Mailing Address:: 155 Fleet Street
City of Mailing Address:: Portsmouth
State or Province of Mailing Address:: NH
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 03801